

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

SHAWR-0018

First Named Inventor

J. Schultz et al.

COMPLETE IF KNOWN

Application Number

Unknown

Filing Date

Herewith

Art Unit

Unknown

Examiner Name

Unknown

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PREWIRED ELECTRICAL APPARATUS HAVING QUICK CONNECT COMPONENTS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number OR ☒ Correspondence address belowKit M. Stetina
Name STETINA BRUNDA GARRED & BRUCKER

Address 75 Enterprise, Suite 250

Aliso Viejo
CityCalifornia
State92656
ZIPUnited States
Country(949) 855-1246
Telephone(949) 855-6371
Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name James Douglas
(first and middle [if any])Family Name Schultz
or SurnameInventor's
Signature 

Date 7-3-02

South Lake Tahoe
Residence: CityCalifornia
StateUnited States
CountryUnited States
Citizenship

Mailing Address 2386 Dundee Circle

South Lake Tahoe
CityCalifornia
State96150
ZIPUnited States
CountryNAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name Michael Henry
(first and middle [if any])Family Name Weber
or SurnameInventor's
Signature X 

X Date 7/3/02

South Lake Tahoe
Residence: CityCalifornia
StateUnited States
CountryUnited States
Citizenship

Mailing Address 2163 Inverness Drive

South Lake Tahoe
CityCalifornia
State96150
ZIPUnited States
Country☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/02A (10-00)

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name Gary Lee

Family Name Petrak

Name

or Surname

Inventor's
Signature

Date

Costa Mesa
Residence: CityCalifornia
StateUnited States
CountryUnited States
Citizenship

Mailing Address

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Mailing Address

City Costa Mesa

California
State92626
ZIPUnited States
Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name Ronald D.

Family Name Shaw

Inventor's
Signature

Date

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StateUnited States
CountryUnited States
Citizenship

Mailing Address

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Mailing Address

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California
State92625
ZIPUnited States
Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name

Family Name
or SurnameInventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

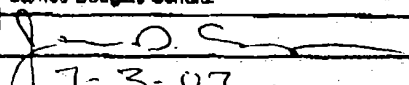
City

State

ZIP

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POWER OF ATTORNEY OR		Application Number	
		Filing Date	
		Inventor(s) Name	
<input type="checkbox"/> The above-mentioned Customer Number: Attention: (attorney name)		Schultz et al.	
<input type="checkbox"/> Practitioners at Customer Number _____ Code Label here Attention: (attorney name)			
OR			
<input checked="" type="checkbox"/> Firm or Individual Name	Kit M. Stetina, Esq.		
Address	STETINA BRUNDA GARRED & BRUCKER		
Address	75 Enterprise, Suite 250		
City	Aliso Viejo	State	California
Country	United States		
Telephone	(949) 855-1246	Fax	(949) 855-6371
I am the:			
<input checked="" type="checkbox"/> Applicant.			
<input type="checkbox"/> Assignee of record of the entire interest Certificate under 37 CFR 3.73(b) is enclosed			
SIGNATURE OF Applicant or Assignee of Record			
Name	James Douglas Schultz		
Signature			
Date	7-3-02		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> * Total of _____ forms are submitted			

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PTO/SB/61 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	Unknown
	Filing Date	Herewith
	First Named Inventor	J. Schultz et al.
	Group An Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	SHAWR-0018

I hereby appoint:

☒ Practitioners at Customer Number 007663 Place Customer Number Bar
Attention: Kit M. Stetina Code Label here
OR
☐ Practitioner(s) named below:

Name	Registration Number
as my attorneys to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connect d therewith.	

Please change the correspondence address for the above-identified application to:


☐ The above-mentioned Customer Number Attention: [attorney name]
OR
☐ Practitioners at Customer Number _____ Code Label here
Attention: [attorney name]
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Kit M. Stetina, Esq.				
Address	STETINA BRUNDA GARRED & BRUCKER				
Address	75 Enterprise, Suite 250				
City	Aliso Viejo	State	California	ZIP	92658
Country	United States				
Telephone	(949) 855-1246	Fax	(949) 855-6371		

I am the:

☒ Applicant.
☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE OF Applicant or Assignee of Record

Name	Michael Henry Weber
Signature	
Date	<u>7/3/02</u>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	Unknown
	Filing Date	Herewith
	First Named Inventor	J. Shultz et al.
	Group Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	SHAWR-001B

I hereby appoint:

☒ Practitioners at Customer Number 007663
Attention: **Kit M. Stetina**

Place Customer Number Bar

Code Label here

OR

☐ Practitioner(s) named below:

Name

Registration Number

as my attorneys to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number: Attention: [attorney name]

OR

☐ Practitioners at Customer Number _____
Attention: [attorney name]

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OR

☒ Firm or Individual
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Telephone (949) 855-1246 Fax (949) 855-6371

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE OF Applicant or Assignee of Record

Name Ronald D. Shaw

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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	First Named Inventor	J. Shultz et al.
	Group Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	SHAWR-001B

I hereby appoint:

☒ Practitioners at Customer Number 007663
Attention: Kit M. Stetina

Place Customer Number Bar

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OR

☐ Practitioner(s) named below:

Name

Registration Number

as my attorneys to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number: Attention: [attorney name]

OR

☐ Practitioners at Customer Number _____
Attention: [attorney name]

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☒ Firm or Individual
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Country United States

Telephone (949) 855-1246 Fax (949) 855-6371

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE OF Applicant or Assignee of Record

Name Gary Lee Petrak

Signature _____

Date _____

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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